

# British Anti-Tobacco Society.

Instituted April, 1853.

"Shun Smoking as you would self-destruction."—*Lancet*.

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## The

## Anti-Tobacco

## Journal.

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*Communications to be fully prepaid and addressed to the Editor  
of the Journal, from whom the Publications may be had,*

*Clissold Lodge, 30, Bethune Road, Stoke Newington, N.  
Or of the Rev. A. Sims, Uxbridge, Ontario, Canada.*

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# *A Vital Question.*

*Can a narcotised brain—help its owner—to “Love the Lord our God with all his might, with all his soul, and with all his strength?”*

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## British Anti-Tobacco Society.

ESTABLISHED 1853.

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### The Associate's Branch of the Pearl and Purple Ribbon Ladies' Court.

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#### MOTTOES.

“Whatsoever is lovely and of good report.”

“He that *ruleth his spirit*—is greater than he who taketh a city.

“Not with *eye service* as men pleasers, but with *singleness of heart as unto GOD.*”

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#### I

resolve, for the Praise and Glory of the King of Kings, to discountenance the *ab-use of Tobacco and Strong Drink.*

To *rule my spirit.* To cultivate self-respect—by doing unto my neighbours as I would they should do to me.

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### Prayer.

(A LOGICAL SEQUENCE)

Great and Almighty God, be pleased to help me by Thy Holy Spirit for Jesus Christ's sake—to be *strong to think, to speak and to act rightly*—that so I may have a healthy soul, a healthy mind, a healthy body, and healthy circumstances—which will make my life a pleasure to myself, so a pleasure to others and therefore a pleasure and praise to Thee! Amen.

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*You are earnestly requested to sign this, and return it with your address prepaid, to*

THE EDITOR OF THE “ANTI-TOBACCO JOURNAL,”

Clissold Lodge, 30, Bethune Road,

Stoke Newington, N.

*Yearly Member's Card and Badge, One Copy Monthly of the “Anti-Tobacco Journal” for 12 months. and 50 Handbills, post free, 2/7½d. Yearly Member's Card, Badge and Two Copies of the “Anti-Tobacco Journal” and 12 Handbills Post Free, 7½d.*

N.B - UNPAID LETTERS REFUSED.



# The Anti-Tobacco Journal.

“He that hath Ears to hear let him hear.”

~~~~~  
“Can that which is morally wrong be politically right?” Can that which would be criminal for Solus, be righteous for Plus? If I force poison upon Solus against his will, could I plead—Not guilty? Can then those who forced Opium Poison upon a nation, be guiltless? Is it a mistake to consider “that the blindness of the English Nation concerning Tobacco” is an outgrowth from the seed sowing per force of Opium Poison in China?  
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## Testimony of Eminent Physicians.

From “THE COMMON USE OF TOBACCO CONDEMNED,”

By Rev. ALBERT SIMS.

The *Phrenological Journal* says:—“Half the old Tobacco-users one meets are in a state of semi-imbecility. Their memory is leaky, moral sense blunted, general disposition impaired, and tone of both body and mind let down.”

Dr. GUNN states that “a few drops of the essential oil of Tobacco will extinguish life in man; also, “it is a mortal poison when applied to the open vessels of a wound.” How can any individual, with the above facts before him, indulge in the use of so deadly a poison?

Says the venerable Dr. Woods:—“Once, when I was young and knew nothing of the danger of Tobacco, I was tempted by an old chewer to use it, which I did for a little while; in consequence I was suddenly sick and intoxicated, and was taken up as dead. The poison was as nearly fatal as it could be, consistently with remaining life.”

Dr. RUSH said, in reference to Tobacco:—“It produces dyspepsia and imparts to the complexion a disagreeable dusky colour.”

The Half-Yearly abstract of the Medical Sciences for 1854 describes a case of angina pectoris resulting from Tobacco using.

Sir B. W. RICHARDSON, in that very able work entitled “Diseases of Modern Life,” shows at length how its use diseases the blood, the stomach, the mucus membrane of the mouth, the heart, the organs of sense, as the eye, the ear and the brain.

Sir B. W. RICHARDSON, who first in England investigated the merits of Liebrech’s discovery of hydrate of chloral as a



narcotic says that after ten years he almost regrets that he took any part in its introduction, and he ranks the toxicants in the following order as to extent of use or misuse: Alcohol, Tobacco, Opium, absinthe, chloral, hydrate, chloradyne, ether, and chlorform.

Speaking of the decay of the senses caused by Tobacco, the *Scalpel* says:—"If there is a vice more prostrating to the body and mind, and more crucifying to all the sympathies of man's spiritual nature, we have yet to be convinced of it."

Dr. JAMES COPLAND said:—"Smoking Tobacco weakens the nervous powers, favors a dreamy, imaginative and imbecile state of mind, produces indolence and incapacity for manly or continuous exertion, and sinks its votary into a state of careless or maudlin inactivity, and selfish enjoyment of his vice."

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## Delirium Tremens.

THIS is one of the most fearful diseases with which sin avenges itself upon the human race.

Dr. A. B. Spoor, of New York, a learned physician, says that he is prepared to shew that the horrible disease delirium tremens, has been ascribed to a wrong source—Alcohol instead of Tobacco. He says prior to the use of Tobacco delirium tremens was unheard of and unknown.

Dr. Lizars records three cases of this disease produced by Tobacco alone. Drs. Mussey and Williams report similar cases.

The lamented Geo. Trask says, "In the Marshall Infirmary in Troy I saw a patient who could not rise from his seat without help; when he was raised, however, he would stand by the hour trembling. On enquiring, he informed me that he had been in the habit of using two papers of Tobacco daily, one of Smoking and one of Chewing."

Dr. Whitfield, of St. Thomas' Hospital has seen three cases of delirium tremens, induced by Tobacco Smoke alone.

A man died with this terrible disease in Monee, Ill., a few years ago, who was never known to use any kind of liquor, but was an inveterate user of Tobacco.

Squire McGill, of Covington, Ky., died some time ago of delirium tremens from the excessive use of Tobacco and coffee.

A friend gives us a very striking case that came under his own notice, that was cured by giving up Tobacco.

Says Dr. Mussey:—"I was acquainted with a gentleman in Vermont who conscientiously abstained from all intoxicating drinks, yet died of delirium tremens from the excessive use of Tobacco." Many similar cases might be given did space permit.



## Effects of Snuff and Tobacco.

THE following observations, from a physician of eminence, addressed to the Secretary of the British Anti-Tobacco Society, deserve consideration:—

“I sincerely wish you all success in your benevolent and disinterested efforts to arrest the progress of one of the most prevalent, disgusting, and pernicious practices of the times in which we live.

“As a Medical man, I have no hesitation in affirming my conviction, based on long and extensive observation, that the use of Snuff and Tobacco must be classed with the worst evils existing in society. I doubt if, under any circumstances, the human constitution is benefited by their employment; and language would fail me were I to attempt to detail the bodily and mental diseases they produce. In my now lengthened medical life I have often seen the worst and most intractable forms of indigestion, and the most distressing and fatal cases of stomach and liver diseases traceable to Snuff and Tobacco, and I am confident this poisonous weed produces every variety and degree of nervous derangement from depression of spirits to palsy, apoplexy, and insanity.

“If the physical energy of a people constitute one main source of a nation's power, next to intoxication from drink, there is nothing so certainly destructive as the use of Snuff and Tobacco; and if health be to every individual an inestimable blessing, surely it is little less than suicidal madness that multitudes voluntarily sacrifice it at the shrine of the goddess Tobacco.”

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## Tobacco-Using is an Unnatural Habit.

THERE is not one man in fifty who cannot remember the peculiar effect of the first quid of Tobacco he placed in his mouth, or the first pipe he essayed to smoke; and we hazard nothing in premising that the remembrance of that experience recalls anything but pleasant sensations. When a lad makes his first attempt at Tobacco-poisoning, what do we observe? A deathly pallor overspreads his face; his head swims; a feeling of indescribable agony seizes upon him; he reels, perhaps falls, and sheepishly drags himself away into some secluded nook where he can enjoy the beatitudes of Tobacco unobserved and unmolested, meanwhile beguiling the agonising hours with the amusing pastime of rolling on the grass, or the more serviceable one of tickling his throat with a feather to induce his stomach to turn out what he has himself put in.



How would it be possible for nature to express in more forcible terms her repugnance of the filthy weed? Does she not say, in language unmistakable, I have no use for Tobacco? there is no room for it in my dominion? it interferes with my operations? do not insult me with the disgusting, poisonous stuff?

Very rarely, indeed, can a man be found who did not have to learn to use Tobacco. This alone is sufficient evidence of its anti-vital, unnatural character; and whatever is unnatural, that is, repugnant to natural, unperverted tastes, is evidently a thing unfit to minister to the wants of the human body.

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### Girl Victim of Cigarettes.

HOLLOW-EYED, nervous, and with fingers deeply stained with the yellow nicotine of cigarettes, the once pretty Jennie MacCracken moves listlessly about her parents home near Elmwood, United States, a victim of the cigarette habit.

Hers is one of the most peculiarly sad cases resulting from the deadly cigarette that has been reported. The habit was begun "just for fun," but it soon established its grasp upon the young woman.

She had Smoked for nearly a year before her parents discovered the sad fact, and alas their efforts to help her to break off the habit were unsuccessful. She became so nervous and irritable when compelled to cease smoking, that the idea of stopping it suddenly was abandoned, as she was so depressed, and would sit for hours with her hands folded, and when spoken to only answering in monosyllables. At length she could not sleep until she had a cigarette. Frequently she would fall asleep with one between her lips, and several times her bedclothes were set on fire through this practice of smoking. A doctor says she can *only recover* if she desists from smoking. It is for the sake of such cases as this that Christians are urged by the apostle to "deny themselves" and "abstain from all appearance of evil."

*Christian Herald.*

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### Evils of Tobacco Using.

*(From the American Health Reformer.)*

We feel no hesitancy in making, without qualification, the statement that Tobacco ruins a man physically, mentally, and morally, and is a social nuisance and a national curse.



To make good this claim we shall present a series of well-attested facts relating to the *Physical Evils, Mental Evils, Moral Evils, Social Evils, and Political Evils*, attending its use.

1. *Tobacco is a deadly poison.*

One hundred ounces of Virginia Tobacco contains seven ounces of nicotine, a poisonous oil whose deadly properties are second to no other known substance but Prussic acid. A single drop on a cat's tongue produces death in two minutes! The vapour alone will kill a large cat. Many cases of death have occurred as the result of applying to a cut or bruise a little of this oil from an old Pipe. Its application to the skin as an ointment has frequently been fatal. It is to the presence of this terrible poison that all the virtues of Tobacco are due; and it has been estimated that the amount of poison contained in the annual crop of Tobacco is sufficient to exterminate all animal life from the globe if rightly administered. The reason why Tobacco-users do not die immediately is, because they do not take the poison in fatal doses. But it is no less sure in its results. Like Opium, arsenic, strychnine, corrosive sublimate, and other poisons, it may be tolerated for years; but its sure and awful consequences come at last, and, indeed are manifested all along to him who has learned to discern them. A single Cigar contains poison sufficient to kill two men, if concentrated.

Hundreds of cases of fatal poisoning by Tobacco might be cited from numerous medical works. Only a few years ago, a homicide was committed in England, by means of nicotine, the murderer crowding a few drops of the oil into the mouth of his victim. A Turkish slave once killed his master by dropping into his ear, while he was sleeping, a few drops of oil from his pipe.

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## Opium as a Remedy and Prophylactic against Malaria.

To support the anti-malarial theory, which neither facts or figures would lend themselves to, Sir William Roberts revives old and discredited views of opium in which it was found that Opium contained *anarcotine* which he credits with distinct "antiperiodic properties," of which Patna Opium contains 6.36 per cent.

"It would therefore require 16 grains of crude Opium to equalise the minimum dose, 1 grain of anarcotine, which



was found effective in arresting the paroxysms of intermittent fever, and 48 grains to equalise the maximum dose. From these calculations it may be inferred that only large consumers of Opium would be absolutely protected against the malarial poison. . . . During an attack of ague, quinine is given in doses of five to ten grains; but a dose of two grains taken daily is held to be effective as a prophylactic against recurrent attacks. The same rule probably holds good as regards Opium and its alkaloid *anarcotine*. On this view it may be assumed that moderate consumers of Opium, although not rendered absolutely immune against the malarial poison, would be more or less protected from recurrent attacks—and if the attacks returned, they would return less frequently and with mitigated severity. These particulars, I think, adequately explain why Opium-eaters are not altogether exempt from malarial fevers. The smaller consumers either lack the means or they lack the tolerance which would enable them to take Opium in sufficient quantity to contain an efficient protective dose of *anarcotine*. The question was often mooted before the Commission why it was that notwithstanding all this evidence in favour of Opium in malaria, medical men in India, *do not prescribe Opium* for the cure and prevention of malarial fevers? The explanation is very simple in the light of the facts disclosed above. Opium contains morphia as well as *anarcotine*. *This puts an absolute bar to the use of Opium as a general antiperiodic. It could not be so used without the most serious risk of narcotic poisoning.*"

It is assumed in the above quotations (1) that moderate consumers of Opium are protected against recurrent attacks of fever; and (2) that excessive consumers are rendered immune against the malarial poison. Both these statements every Indian Physician knows to be without any foundation in fact. Opium-eaters enjoy no immunity from malarial fevers, nor are their attacks less frequent nor less severe when they do occur. To obtain any benefit from the minute quantity of narcotine contained in Opium a patient must at least take 16 grains in a dose to "be effective in arresting the paroxysms of intermittent fever," and probably at least 4 grains—a poisonous dose—to act as a mild prophylactic. Let a case be supposed. A patient has an attack of quotidian fever; he has had previous experience, not once but many times, that the fever cures itself or wears itself out in the system. We come and tell him of the antiperiodic properties of Opium, and assure him that, although a  $\frac{1}{4}$  grain dose—with which he must begin—will not arrest the paroxysms of fever, yet when he by daily practice acquires tolerance for 16 grains per day, a few years hence (if he can afford to buy that quantity), he will be protected. Or, we may tell him



that 4 grains a day, which can be taken after 6 month's habitual eating, will not prevent you from having fever; but the attacks, when they return, will "return less frequently or with mitigated severity." Would that dim prospect of cure, even if it were *true* (which it is not) induce the fever-stricken ryot to begin Opium? Again, we are informed that morphia in Opium "puts an absolute bar to the use of Opium as a general antiperiodic. It could not be so used without the most serious risk of narcotic poisoning." If morphia contained in Opium "puts an absolute bar to the use of Opium as a general antiperiodic" in the hands of skilled medical men, how is it so safe, so efficient, and so highly commended when left in the hands of ignorant natives of India? And if physicians never prescribe it for malarial fevers, how have the people, who *do not use* it, found out its antiperiodic properties? One does not know which to admire most; the lack of reliable information regarding the Bengal ryot and his habits shewn by Sir William Roberts, or the ingenuous confidence with which he elaborated an illusive theory, which a visit to any malarious village in Bengal, with a non-official interpreter, would dispel for ever.

But there is yet one feature of the relation of the Opium habit to malaria in Bengal which we must not overlook, before proceeding to consider the remaining sections of the memorandum, viz., the relation which age bears to malaria and the Opium habit.

Apart from the habit of given Opium to infants, which is quite unknown in rural Bengal, there is a consensus of opinion that Opium-eating is usually begun about middle life—40 to 45 years of age. Sir William Roberts says: "The Opium habit is mainly a habit of middle life and advancing years," and Dr. Crombie even admits the same, when questioned by Mr. Fanshawe.

Question: "You state that the opium-eating habit is a habit which is taken up in advanced life—this remark applies to Eastern Bengal?"

Answer: "Yes, to Eastern Bengal, and Calcutta."

If we examine the statistics of any dispensary relating to out-door malarial fever patients in any of the malarial districts of Bengal, we find that the incidence of malarial fevers falls most severely on the ages of infancy and childhood—from 1 to 12 years of age; childhood being the period of greatest mortality, as it is the period of least resistance to the malarial poison.

In malarial Bengal, therefore, one would expect that if the prophylactic properties of Opium were known at all to the people, it would be found as a household remedy for childhood and youth, to arrest excessive mortality, or mitigate the untold suffering and misery inseparable from the malarial



environment. Instead of this, we find, as already stated, that the habit is unknown among children, and as Dr. Crombie admits, is mainly a habit of "advanced life," presumably begun by those whose constitutional fitness and social comforts have enabled them to survive the fatal periods of childhood and youth. Even if we could grant that the habit is common among middle-aged ryots—which it is not—an Opium-eating parent, finding the drug beneficial to himself, would surely not withhold it from his suffering offspring, to do so would be "a wanton cruelty" indeed; but we neither find the parents nor the children of the poor ryots of Eastern Bengal using the drug for any such purpose.

We must apologise to local medical men in Bengal for being obliged "to slay the slain" and to drive this silly phantom of "Opium as a prophylactic" into the congenial atmosphere of fiction from whence it at first emerged: lest otherwise those who are unacquainted with Bengal might believe that there was some truth in the statement, so diligently put forward by official witnesses, that Opium was used as a prophylactic against malaria by the ryots of Bengal. We thus see that the malarial theory as the cause of the Opium habit, utterly breaks down in the most malarious province in India, when brought to the test of ascertained facts and figures available to any medical man who knows Bengal and the Bengal ryot.—*Indian Medical Record*.

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### Realism in the Pulpit.

THE Rev. W. L. Laufman, of Cadillac, Michigan, recently advertised that on a certain Sunday he would, to illustrate an anti-Tobacco Sermon, kill two cats in the pulpit of the local Methodist Church. A packed congregation rolled up to see the show. Prominent on the pulpit were packages of fine-cut plug, and chewing Tobacco. At a selected point in the tirade an assistant brought up the cats, and a Dr. Miller administered Nicotine to them. The first cat died squealing and squirming, in a minute-and-a-quarter, after getting a second dose. Then this "humble follower" announced to the thrilled congregation that next Sunday he would kill some more cats to show the evil effects of alcohol, and would also have on exhibition the stomach of a drunkard.

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# The Temperance Lifebuoy.

ON our walls and bill-posting stations there can be seen a pictorial placard on which is depicted a man dressed in the garb of a lifeboatsman, in the act of throwing a lifebuoy to a drowning man, who has only to grasp the buoy and the lifeboatsman will pull him safely to shore.

This picture, though only an advertisement, beautifully represents the work of the Temperance reformer, the drowning man being the drunkard, and the lifebuoy the Temperance pledge. We saw last month many of the dangers men were subject to, and how carefully they have to steer their vessels to avoid calamity. Yet frequently the cry is heard, "Man overboard"; some poor soul is discovered sinking in the sea of intemperance, and immediately the Temperance lifeboatsman throws the lifebuoy—the pledge—and shouts loudly to the man to grasp it for rescue and safety, *the result largely depending upon the willingness of the man to assist in effecting his own salvation.*

Look once again at the pictorial placard mentioned above, and notice how singularly appropriate are the words written upon the buoy:—

FOR SAVING LIFE

FOR PRESERVATION OF HEALTH.

How exactly this represents the work of Temperance.

I. FOR SAVING LIFE. We saw in a former lesson how it was estimated that there are at the present time no less than 600,000 drunkards, an army equal to the entire population of Buckinghamshire, Berkshire, and Oxfordshire; and that 120,000, equal to the population of Herefordshire, die annually, directly or indirectly, through drink. Of these at least one-half—60,000—are the *direct* result of alcoholic poisoning. Now if in any given year these 60,000 would grasp and hold on to the Temperance lifebuoy, it would mean a saving of so many lives during that year. Hence our claim FOR SAVING LIFE. Mr. Chamberlain once said: "If I had an enchanter's wand, and could destroy to-morrow the desire of strong drink in the people, what changes do we see? *We should see more lives saved than are consumed in a century of bitter savage war.*" Our Temperance societies, Our Good Templar Lodges, etc., are to-day proud to claim as their members many who have thus grasped the Temperance lifebuoy, and been rescued from drowning in the sea of intemperance.

II. FOR PRESERVATION OF HEALTH. It is not the drunkard merely who destroys his health and life, for even moderate drinking is most injurious to the system. Dr. Ramsay, of Charlestown, U.S.A., says:—

"Health is much injured by those who are frequently sipping strong liquors, though they are never intoxicated. It is a good general rule never to drink anything but water;" while Dr. Harris, in his official report to the Secretary of the American Navy, said:—"The moderate use of spirituous liquors has destroyed many who were never drunk."



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